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05/20/2004

SCHMEISER, OLSEN + WATTS SUITE 201 3 LEAR JET LATHAM, NY 12033



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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/666,607	09/18/2003	Timothy W. Budell	END920030005US1	8551

TITLE OF INVENTION: RADIAL CONTACT PAD FOOTPRINT AND WIRING FOR ELECTRICAL COMPONENTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	08/20/2004
EXA	EXAMINER		CLASS-SUBCLASS	]	
NGUYE	N, TRUC T	2833	439-055000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Schmeiser, Olsen & 2Watts; William H. 3Steinberg

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

International Business Machines Corporation, Armonk NY

Please check the appropriate assignee category or categ	ories (will not be printed on the patent);	individual 🔾	Sorporation or other private group entity	government	
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